

Syllabus

Counseling Interventions for Adults Counseling Psychology 524 Fall, 2011 September 8, to December 15 1:00 – 4:15

Instructor: Gordon Lindbloom
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Office Hours

Monday and Tuesday 3:00 – 4:00
Wednesday 2:00-4:00
By Appointment
Telephone appointments are preferred when they prevent extra trips to campus

Please Note: The office staff keeps my appointment schedule so that everyone has regular and equal access to scheduling appointments. Please contact the office at (503) 768-6060, between 9:00 and 5:30, to schedule regular appointments. If my office hours do not work for you, leave a message with the office staff about times you can come in or have a scheduled telephone appointment and I will do my best to work out a satisfactory way for us to have the discussion you need.

Catalogue Course Description

Content: Identification, assessment, diagnosis, and treatment of mental, emotional, substance abuse, and addictive disorders in late adolescence and adulthood. Covers adjustment, mood, anxiety, psychotic, dissociative, impulse, sexual, personality, and addictive disorders, including gambling and eating disorders. Topics include multicultural, interpersonal, and relationship factors; evidence-based treatments; and information technology research tools. Emphasis is on planning comprehensive, multifaceted treatment interventions.

Learning Objectives: Students completing this course with satisfactory evaluation will be able to . . .

1. Demonstrate how to use information from multiple assessment strategies to create treatment plans that are client-centered, individualized, and culturally sound. (CC: 7h, 7f, 5b, 2c, A5, C2, C4, C7)

2. Describe and explain the major elements of intervention (treatment) planning strategies. (CC: 5b, 5c, C2, C7)
3. Create basic treatment plans drawing on evidence-based treatments for depression, anxiety disorders, substance abuse, and other common presenting problems. (CC: 5b, 5c, 3c, C2, C4)
4. Describe and explain the application of core evidence-based psychosocial interventions for common problems in mental health and addictions treatment. (CC: 5b, 5c, 3c, C1, C2)
5. Construct means of evaluating client progress. (CC: 7g, 5b)
6. Find, evaluate, and present critical concepts and evidence about diagnosis and treatment of a specific clinical issue or disorder. (CC: 8e)
7. Identify and use information about the personal, social, and cultural context of a client's life to formulate client-centered treatment plans. (CC: 2c, 5b, 5c, 3c, A5, C3)
8. Describe and give examples of ways to integrate client's values, positive personal goals, religious and spiritual consciousness and commitments into treatment planning. (CC: 2c, 5b, 5c)
9. Describe, explain, and demonstrate through role plays and case planning how to use the DSM-IV system and criteria to enhance assessment and treatment planning for individual clients (CC: C5)
10. Describe, explain, and demonstrate via case studies how to choose appropriate modalities for intervention including group, family, medical, and other systems including community-based supports, and plan for short, intermediate, and long-term engagement based on client goals, needs, and resources. (CC: C3, C4, C7)

Requirements for Credit:

Regular attendance and active participation in class sessions and workgroups*.

Complete individual and group treatment planning exercises as assigned.

Complete one individual review of best practices in working with a client problem which is not a major focus of attention in the regular class sessions. (A guide will be provided.)

Complete an experimental personal change intervention project. (A guide will be provided.)

Complete mid-term exams with satisfactory scores.

Evaluation Criteria:

Mid term exams

50% of grade

These exams will use multiple forms of questions. Points will be assigned for correct answers in each type of question. Total points will be placed on a curve and grades will be assigned based on general levels of exceptional mastery, competent mastery, minimal mastery, and insufficient mastery.

Personal Change Project	20%
Best Practices Report	20% of grade
Attendance, Participation and Group Work	10% of grade
Grades	A Exceptional
	B Competent and Sound
	C Minimal Competence
	D Insufficient evidence of minimum mastery
	F Failure to demonstrate learning

Notes on attendance and participation.

CPSY Departmental Attendance Policy

Class attendance is expected and required. Any missed class time will be made up by completing extra assignments designed by the instructor. Missing more than ten percent of class time may result in failure to complete the class. This would be 4.5 hours of a 45 hour class (3 credits), 3.0 hours for a 30 hour class (2 credits) or 1.5 hours for a 15 hour class (1 credit.) In case of extreme hardship and also at the discretion of the instructor, a grade of incomplete may be given for an assignment or the entire course. In such cases, the work to be submitted in order to remove the incomplete must be documented appropriately and stated deadlines met. Students are expected to be on time to class and tardiness may be seen as an absence that requires make-up work.

Please discuss any concerns you may have about this policy or how it might affect you with me.

Class sessions will emphasize active participation with substantial time devoted to working on cases. The time devoted to instructor presentations going over basic concepts and information from the readings will be limited. Questions and discussion are always encouraged. In addition to the readings PowerPoint outlines will be provided that integrate information in ways the readings do not. We will practice basic intervention skills by role-playing and will observe and evaluate video demonstrations of best strategies for helping people change. The readings and outlines are not extensive but do require thoughtful attention. Come to class prepared.

Academic Integrity

Academic integrity means doing authentic work for this class, work that is your own and is specifically for this class. Plagiarized work or work that has been substantially or completely prepared for other classes does not meet this standard of integrity. This includes copying verbatim or in essence treatment plans and interventions from published books on the subject. Any such materials submitted for this class will not receive credit and their submission will be considered as a possible breach of ethical standards of conduct.

MOODLE

Most of you are at least minimally familiar with Moodle, the online learning system now in use at Lewis and Clark and the Grad School. I will be posting the syllabus, the course schedule, readings, learning materials and handouts, and possibly some activities for you to pursue between classes. The access code (enrollment key) will be given at the beginning of the term.

If you do not have the computer capabilities to access Moodle on the Lewis and Clark website, please notify me.. Also, if you cannot download and read documents in MSWord, PowerPoint, or Adobe Acrobat/pdf. Format, please let me know as well. Text documents will be posted in MSWord, *.docx format, or *.doc (compatibility) format. If your computer software does not accept the *.docx format, you can download a small translator program that will make this possible. Go to the Information Technology Web page on the Lewis and Clark website, go to software downloads, and choose the MSWord XML converter.

The use of Moodle for this course is experimental. If you have trouble with Moodle or cannot access it I will see that all information and materials are available by other means. That said, students were enthusiastic last year about having course materials available on Moodle. Keep me informed of your benefits and any difficulties you have so we can make this work for us.

Texts:

DSM-IV TR (2000) Washington, D.C. American Psychiatric Association. (used as a reference, not a new purchase)

Greenberger, D. and C. Padesky (1995). Mind Over Mood: A Cognitive Therapy Manual for Clients. New York, Guilford.

Hersen, M. and M. Biaggio, Eds. (2000). Effective Brief Therapies: A Clinician's Guide. San Diego, CA, Academic Press.

Other readings as assigned and provided in class or online.

Bibliography

- Alford, B. A. and A. T. Beck (1997). The Integrative Power of Cognitive Therapy. New York, Guilford.
- Antony, M. M., and Barlow, David H. (2002). Handbook of Assessment and Treatment Planning for Psychological Disorders.
- Association, A. P. (2000). Diagnostic and Statistical Manual of Mental Disorders. Washington, D.C., American Psychiatric Association.
- Barlow, D. H., Ed. (2001). Clinical Handbook of Psychological Disorders.
- Carnes, P. J. and K. M. Adams, Eds. (2002). Clinical Management of Sex Addiction.
- Connors, G. J., Donovan, Dennis M., & DiClemente, Carlo C. (2001). Substance Abuse Treatment and the Stages of Change: Selecting and Planning Interventions. New York, Guilford Press.
- Denning, P. (2000). Practicing Harm Reduction Psychotherapy. New York, Guilford.
- Enright, R. D. and R. P. Fitzgibbons (2000). Helping Clients Forgive: An Empirical Guide for Resolving Anger and Restoring Hope. Washington, D.C., American Psychological Association.
- Fisher, J. E. and W. T. O'Donohue, Eds. (2006). Practitioner's Guide to Evidence-Based Psychotherapy. New York, NY, Springer.
- Foy, D. W. (1992). Treating PTSD: Cognitive-Behavioral Strategies. North Tonawanda, NY, MHS.
- Greenberger, D. and C. Padesky (1995). Mind Over Mood: A Cognitive Therapy Manual for Clients. New York, Guilford.
- Hanna, F. J. (2001). Therapy with Difficult Clients: Using the precursors model to awaken change. Washington, D.C., American Psychological Association.
- Hersen, M. and M. Biaggio, Eds. (2000). Effective Brief Therapies: A Clinician's Guide. San Diego, CA, Academic Press.
- Lawson, G. W., Lawson, Ann W., & Rivers, P. Clayton. (2001). Essentials of Chemical Dependency Counseling. Gaithersburg, Maryland, Aspen Publishers, Inc.
- Leahy, R. L. (2001). Overcoming Resistance in Cognitive Therapy. New York, Guilford.
- Margolis, R. D., & Zweben, Joan E. (1998). Treating Patients with Alcohol and Other Drug Problems: An Integrated Approach. Washington, D.C., American Psychological Association.
- Margolis, R. D. and J. E. Zweben (1998). Treating patients with alcohol and other drug problems : an integrated approach. Washington, DC, American Psychological Association.
- Marlatt, G. A., & VandenBox, Gary R. (eds.) (1997). Addictive Behaviors: Readings on Etiology, Prevention, and Treatment. Washington, D.C., American Psychological Association.
- Maruish, M. E. (2002). Essentials of Treatment Planning. New York, John Wiley & Sons.
- Miller, W. R., & C'de Baca (2001). Quantum Change: When Epiphanies and Sudden Insights Transform Ordinary Lives. New York, Guilford.

Miller, W. R., and Rollnick, Stephen (2002). Motivational Interviewing: Preparing People for Change. New York, Guilford.

Miller, W. R., Andrews, Nicole R., Wilbourne, Paula, & Melanie e. Bennett (1998). A Wealth of Alternatives: Effective Treatments for Alcohol Problems. Treating Addictive Behaviors. W. R. a. H. Miller, Nick. New York, Plenum: 203-216.

Miller, W. R. a. H., Nick, Ed. (1998). Treating Addictive Behaviors. Applied Clinical Psychology. New York, Plenum.

Nezu, A. et al (2004) Cognitive-Behavioral Case Formulation and Treatment Design: A Problem-Solving Approach. New York, NY. Springer Publishing Company.

Ogles, B. M., M. J. Lambert, et al. (2002). Essentials of Outcome Assessment. New York, John Wiley & Sons.

Roberts, A. R. (2002?). Crisis Intervention.

Rosenthal, R. N., and Westreich, Laurence (1999). Treatment of Persons with Dual Diagnoses of Substance Use Disorder and Other Psychological Problems. Addictions: A Comprehensive Guidebook. B. S. McCrady, & Epstein, Elizabeth. New York, Oxford University Press: 439-476.

Segal, Z. V., J. M. G. Williams, et al. (2002). Mindfulness-based cognitive therapy for depression: a new approach to preventing relapse. New York, Guilford Press.

Sperry, L. (1999). Cognitive Behavior Therapy of DSM-IV Personality Disorders. Philadelphia, PA, Brunner/Mazel.

Valesquez, M. M. e. a. (2001?). Group Treatment for Substance Abuse.

Wampold, B. E. (2001). The Great Psychotherapy Debate: Models, Methods, and Findings. Mahwah, New Jersey, Lawrence Erlbaum Associates, Publishers.

Wells, A. (2000). Emotional Disorders and Metacognition: Innovative Cognitive Therapy. New York, John Wiley and Sons.

Wessler, R., Hankin, Sheenah, & Stern, Johnathan (2002?). Succeeding with Difficult Clients.

Wiger, D. E. and D. K. Kuntley (2002). Essentials of Interviewing. New York, John Wiley & Sons.

Wiger, D. E. and K. B. Solberg Tracking Mental Health Outcomes: A Therapist's Guide to Measuring Client Progress, Analyzing Data, and Improving Your Practice.

Wilson, J. P., Friedman, Matthew J., and Lindy, Jacob D., Ed. (2001). Treating Psychological Trauma and PTSD. New York, Guilford.

Woody, S. (2002). Treatment Planning in Psychotherapy: Taking the Guesswork Out of Clinical Care. New York, Guilford.

Young, J. E. (1999). Cognitive Therapy for Personality Disorders: A Schema-Focussed Approach. Sarasota, FL, Professional Resource Press.